

Depend on our people. Count on our advice. SM

## **REDACTED - FOR PUBLIC INSPECTION**

October 22, 2013

Marlene H. Dortch Secretary Federal Communications Commission 445 12th Street, S.W. Washington, DC 20554

ATTENTION: WIRELINE COMPETION BUREAU

RE: Form 481 ETC filing pursuant to Sections 54.313 and 54.422 SA 381631, ND, Red River Rural Telephone Association Connect America Fund WC Dockets 10-90 and 11-42

Dear Ms. Dortch:

Pursuant to Sections 54.313 and 54.422 of Commission's Rules, Red River Rural Telephone Association, ND, SAC 381631 is filing its Form 481 High Cost and Low-Income Annual Report.

Red River Rural Telephone Association seeks confidential treatment under the Protective Order in this proceeding.<sup>1</sup> Pursuant to the Order, one copy of the confidential document and two copies of the redacted version are provided. The Redacted version is also being filed on the Electronic Comment Filing System.

Please address any correspondence regarding this transmittal to the attention of Tom Campbell at the following address, e-mail or telephone number.

Sincerely,

Tom Campbell

Telecommunications Consultant

tcampbell@otcpas.com

651-621-8511 (v)

651-483-2467 (f)

**Enclosures** 

Cc: Mr. Charles Tyler, FCC Telecommunications Access Policy Division

<sup>&</sup>lt;sup>1</sup> See Protective Order 27, WC Docket Nos. 10-90 et al, Rec 14231 rel. November 16 ("Order")

	m 481 - Carrier Annual Reporting llection Form		FCC Form 481 OMB Control No. 3060-0986 July 2013	/OMB Control No. 3060-0819
<010>	Study Area Code	381631		
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.		
<020>	Program Year	2014		
<030>	Contact Name: Person USAC should contact with questions about this data	Tom Campbell		
<035>	Contact Telephone Number: Number of the person identified in data line <030	651-621-8511 >		
<039>	Contact Email Address: Email of the person identified in data line <030>	tcampbell@gmail.com		
				54.313 54.422 Completion Completion
ANNUA	L REPORTING FOR ALL CARRIERS			Required Required
<100>	Service Quality Improvement Reporting	(complete attached wo	rksheet)	(check box when complete)
<200> <210>	Outage Reporting (voice) < check box if	(complete attached wo	rksheet)	<i>V V</i>
<310>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	(attach descriptive da		·
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice Fixed 0.0 Mobile 0.0 Number of Complaints per 1,000 customers (broat Fixed Mobile			v
<510> <600> <610> <700> <710> <800> <1000> <1000> <1100> <1110> <1110>	Service Quality Standards & Consumer Protection  381631nd510  Functionality in Emergency Situations  381631nd610  Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability  Terrestrial Backhaul (Y/N)?  Terms and Condition for Lifeline Customers	Rules Compliance (check to indicate cert. (attached descriptive da (check to indicate cert. (attached descriptive da (complete attached wa (complete attached wa (if yes, complete attached wa (check to indicate cert. (attach descriptive da (if not, check to indicate cert. (complete attached wa	cument)  fication)  cument)  rksheet)  rksheet)  rksheet)  fication)  cument)  fication)  rksheet)	
<2000> <2005>	Price Cap Carriers, Proceed to Price Cap Additional Including Rate-of-Return Carriers affiliated with Proceeding Records of Price Cap Additional Price Cap Additional Price of Price Cap Additional Price of Price	rice Cap Local Exchange Carriers (check to indicate certi (complete attached wo	_	
<3000> <3005>	Rate of Return Carriers, Proceed to <u>ROR Addition</u>	al Documentation Worksheet (check to indicate certi (complete attached wo	<b>=</b>	v

	ervice Quality Improvement Reporting ollection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code 381631	
<015>	Study Area Name RED RIVER R	RAL TELEPHONE ASSOC.
<020>	Program Year 2014	
<030>	Contact Name - Person USAC should contact regarding this data	impbell
<035>	Contact Telephone Number - Number of person identified in data line <030> 653	621-8511
<039>	Contact Email Address - Email Address of person identified in data line <030> to	mpbell@gmail.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no )
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no ) O
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your con CETC which only receives frozen support, your progress report is only required to address voice telephony service.	pany is a
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document (.pdf)
<113>	Maps detailing progress towards meeting plan targets	
<114>	Report how much universal service (USF) support was received	
<115>	How (USF) was used to improve service quality	
<116>	How (USF)was used to improve service coverage	
<117>	How (USF) was used to improve service capacity	
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	

(200) Service Outage Reporting (Voice)

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	381631
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tom Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030> 651-621-8511	
<039>	Contact Email Address - Email Address of person identified in data line <030> tcampbell@gmail.com	

<220>

<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
NORS									Did This Outage		
Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
Number	Date	Time	Date	Time	<b>Customers Affected</b>	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
						Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
							· · · · · · · · · · · · · · · · · · ·				
						See attache	d				
							u				
					WC	rksheet					
	<u> </u>										

(700) Pric	ce Offerings including Voice Rate Data		FCC Form 481
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	381631	
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.	·
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Tom Campbell	
<035>	Contact Telephone Number - Number of person identified in data line <030>	651-621-8511	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tcampbell@gmail.com	
<701>	Residential Local Service Charge Effective Date 1/1/2013		

<702> Single State-wide Residential Local Service Charge

<703>

>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
Ì									
Ì									
Ì									
Ì					See att	ached worksheet			
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(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	381631
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tom Campbell
<035>	Contact Telephone Number - Number of person identified in data line <03	0> 651-621-8511
<039>	Contact Email Address - Email Address of person identified in data line <03	0> tcampbell@gmail.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
				e attached					
			work	sheet					

. , .	erating Companies ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	381631	
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Tom Campbell	
<035>	Contact Telephone Number - Number of person identified in data line <0	30> 651-621-8511	
<039>	Contact Email Address - Email Address of person identified in data line <0	30> tcampbell@gmail.com	
<810>	Reporting Carrier Red River Rural Telephone Association		
<811>	Holding Company		
<812>	Operating Company		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
-			
-			
-	See a	ttached works	heet
-			
-			
-			
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-			

900) Tril	bal Lands Reporting		FCC Form 481
Data Coll	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
<010>	Study Area Code	381631	
<010>	Study Area Code Study Area Name		
<020>	,	RED RIVER RURAL TELEPHONE ASSOC. 2014	
<030>	Program Year  Contact Name - Person USAC should contact regarding this data	Tom Campbell	
<035>	Contact Telephone Number - Number of person identified in data line		
<039>	Contact Telephone Number - Number of person identified in data line		
(0332	Contact Email Address Email Address of person identified in data file	Campbellegmail.com	
<910>	Tribal Land(s) on which ETC Serves		
	. ,		
<920>	Tribal Government Engagement Obligation	No CAN I I. D	
		Name of Attached Docume	nt (.par)
	If your company serves Tribal lands, please select (Yes,No, NA) for		
	each these boxes to confirm the status described on the attached		
	PDF, on line 920, demonstrates coordination with the Tribal		
	government pursuant to § 54.313(a)(9) includes:		
		Select	
		(Yes,No,	
		NA)	
<921>	Needs assessment and deployment planning with a focus on Tribal		
\3212	community anchor institutions;		
<922>	Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	-		
	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
<927>	Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		
	Compliance with Tribal Business and Licensing requirements.		

(1100) No Terrestrial Backhaul Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	381631
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tom Campbell
<035>	Contact Telephone Number - Number of person identified in data line <030>	651-621-8511
<039>	Contact Email Address - Email Address of person identified in data line <030>	tcampbell@gmail.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

(1200) Te	erms and Condition for Lifeline Customers			FCC Form 481
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819
<b>Data Coll</b>	lection Form			July 2013
-				
<010>	Study Area Code	3	381631	
<015>	Study Area Name	1	RED RIVER RURAL TELEPHONE ASSOC.	
<020>	Program Year	:	2014	
<030>	Contact Name - Person USAC should contact regarding this data		Tom Campbell	
<035>	Contact Telephone Number - Number of person identified in data		651-621-8511	
<039>	Contact Email Address - Email Address of person identified in data	line <030>	tcampbell@gmail.com	
		3:	81631nd1210	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		ame of attached document (.pdf)	
		INC	anc of attached document (.pai)	
<1220>	Link to Public Website	HTTP		
	"Please check these boxes below to confirm that the attached PDF	,		
	on line 1210, or the website listed, on line 1220,			
	contains the required information pursuant to §			
	54.422(a)(2) annual reporting for ETCs receiving low-income			
	support, carriers must annually report:			
<1221>	Information describing the terms and conditions of any voice	~		
	telephony service plans offered to Lifeline subscribers,			
<1222>	Details on the number of minutes provided as part of the plan,			
11222				

(2000) P	(2000) Price Cap Carrier Additional Documentation FCC Form 481					
Data Col	lection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819				
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			July 2013			
Including	Rate-oj-Return Curriers affinated with Frice Cup Locus Exchange Curriers		****, 2525			
	20162					
<010>	Study Area Code 38163					
<015>		IVER RURAL TELEPHONE ASSOC.				
<020>	Program Year 2014					
<030>		ampbell				
<035>		11-621-8511				
<039>	Contact Email Address - Email Address of person identified in data line <030> t	campbell@gmail.com				
CHECK t	he boxes below to note compliance as a recipient of Incremental Connect America	Phase I support, frozen High Cost support, High Cost support to offset a	ccess charge reductions, and Connect America Phase II			
	·	ne information reported on this form and in the documents attached be	- · · · · · · · · · · · · · · · · · · ·			
	- ( , , , , , , , , , , , , , , , , , ,	·				
	Incremental Connect America Phase I reporting					
<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)}					
<2011>	3rd Year Certification {47 CFR § 54.313(b)(2)}					
	or and the second of the secon					
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))					
<2012>	2013 Frozen Support Certification					
<2013>	2014 Frozen Support Certification					
<2014>	2015 Frozen Support Certification					
<2015>	2016 and future Frozen Support Certification					
	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}					
<2016>	Certification Support Used to Build Broadband					
	Connect America Phase II Reporting {47 CFR § 54.313(e)}					
<2017>	3rd year Broadband Service Certification					
<2018>	5th year Broadband Service Certification					
<2019>	Interim Progress Certification					
<2020>	Please check the box to confirm that the attached PDF, on line 2021,					
	contains the required information pursuant to § 54.313 (e)(3)(ii), as a recip	ient	<u>—</u>			
	of CAF Phase II support shall provide the number, names, and addresses of					
	community anchor institutions to which began providing access to broadba	and				
	service in the preceding calendar year.					
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information				

(3000) R	ate Of Return Carrier Additional Documentation		FCC Form 481
Data Col	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
<010>	Study Area Code 381631		
<015>	Study Area Name RED RIVE	R RURAL TELEPHONE ASSOC.	
<020>	Program Year 2014		
<030>	<u> </u>	m Campbell	
<035>	Contact Telephone Number - Number of person identified in data line <030>	651-621-8511	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tcampbell@gmail.com	
CHECK t	he boxes below to note compliance on its five year service quality plan (pursu CFR § 54.313(f)(2). I further certify that	ant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring the information reported on this form and in the documents attacl	
	Progress Report on 5 Year Plan		
(3010)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}	Name of Attached Document Listing Required Information	
(3010)	Please check this box to confirm that the attached PDF , on line 3012,	Name of Actuation Document Listing Required information	
	, ,		
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and		
(5011)	addresses of community anchor institutions to which began providing		
	access to broadband service in the preceding calendar year.		
	decess to broadsand service in the preceding calendar year.		
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}		(Yes/No)
(3014)	If yes, does your company file the RUS annual report		(Yes/No)
	Please check these boxes to confirm that the attached PDF, on line 3017,		<u> </u>
	contains the required information pursuant to § 54.313(f)(2) compliance		
	requires:		
(3015)	Electronic copy of their annual RUS reports (Operating Report for		
	Telecommunications Borrowers)		
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<u> </u>
(3017)	If the response is yes on line 3014, attach your company's RUS annual	Name of Attack of December 11sting December 1 street	381631nd3017
(3018)	report and all required documentation	Name of Attached Document Listing Required Information	(Vec/Ne)
(3018)	If the response is no on line 3014, Is your company audited?		(Yes/No)
	If the response is yes on line 3018, please check the boxes below to		
	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
	: Either a copy of their audited financial statement; or (2) a financial report		
(3019)	in a format comparable to RUS Operating Report for Telecommunications		
	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3020)	· - · · · - · · · · · · · · · · · · · ·		<b>'</b>
(3021)	Management letter issued by the independent certified public accountant		
(3021)	that performed the company's financial audit.		<del>'</del>
	If the response is no on line 3018, please check the boxes below		
	to confirm your submission, on line 3026 pursuant to § 54.313(f)(2),		
	contains:		
	Copy of their financial statement which has been subject to review by an		
(3022)	independent certified public accountant; or 2) a financial report in a		
(-022)	format comparable to RUS Operating Report for Telecommunications		
	Borrowers,		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)			
, ,	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<del></del>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

Page 11 10/10/2013

Certification - Reporting Carrier Data Collection Form		ier	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	381631	
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.	
<020>	Program Year	2014	
<030>	> Contact Name - Person USAC should contact regarding this data Tom Campbell		
<035>	S> Contact Telephone Number - Number of person identified in data line <030> 651-621-8511		
<039>	> Contact Email Address - Email Address of person identified in data line <030> tcampbell@gmail.com		

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to	the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients			
certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this form car	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

	tion - Agent / Carrier lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	381631	
<015>	Study Area Name	RED RIVER RURAL TELEPHONE ASSOC.	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC	should contact regarding this data Tom Campbell	
<035>	Contact Telephone Number -	Number of person identified in data line <030> 651-621-8511	
<039>	Contact Email Address - Emai	Address of person identified in data line <030> tcampbell@gma	il.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)_Tom_Campbell also certify that I am an officer of the reporting carrier; my responsagent; and, to the best of my knowledge, the reports and data prov	is authorized to submit the information reported on behalf of the reporting carrier. ibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ided to the authorized agent is accurate.
Name of Authorized Agent: Tom Campbell	
Name of Reporting Carrier: RED RIVER RURAL TELEPHONE ASS	OC.
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 10/10/2013
Printed name of Authorized Officer: Jeffrey Olson	
Title or position of Authorized Officer: Executive Secretary	
Telephone number of Authorized Officer: 701-553-9075	
Study Area Code of Reporting Carrier: 381631	Filing Due Date for this form: 10/15/2013

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal servi the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, th				
Name of Reporting Carrier: RED RIVER RURAL TELEPHONE ASSOC.				
Name of Authorized Agent or Employee of Agent: Tom Campbell				
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	10/10/2013		
Printed name of Authorized Agent or Employee of Agent: Tom Campbell				
Title or position of Authorized Agent or Employee of Agent Consultant				
Telephone number of Authorized Agent or Employee of Agent: 651-621-8511				
Study Area Code of Reporting Carrier: 381631 Filing Due Date for this form:	10/15/2013			
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communicat 18 of the United States Code, 18 U.S.C. §		fine or imprisonment under Title		

Attachments

	erating Companies ection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010>	Study Area Code 381631	
<015>	Study Area Name RED RIVER RURAL TELEPHONE ASSOC.	
<020>	Program Year 2014	
<030>	Contact Name - Person USAC should contact regarding this data  Tom Campbell	
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<039>	Contact Email Address - Email Address of person identified in data line <030> tcampbell@gmail.com	
<810>	Reporting Carrier Red River Rural Telephone Association	
<811>	Holding Company	
<812>	Operating Company	

13>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	Red River Rural Telephone Association	381631	Red River Communications
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Page 1 of 4

SAC: 381631 State: ND Red River Tel

Form 481 Line No 510 Compliance with Service Quality Standards and Consumer Protection

#### **North Dakota and South Dakota:**

- Red River Tel (Company) will provide service on a timely basis to requesting customers within the Company's designated service area where the Company's network already passes the potential customers premises, and
- 2. The Company will provide service, within a reasonable period of time, if the potential customer is within the Company's designated service area but outside the Company's existing network coverage, if the service can be provided at reasonable cost by:
  - a. Modifying or replacing the requesting customers equipment;
  - b. Deploying a roof-mounted antenna or other equipment;
  - c. Adjusting the nearest cell tower;
  - d. Adjusting network or customer facilities;
  - e. Reselling services from another carrier's facilities to provide service; or
  - f. Employing, leasing, or constructing an additional cell site, cell extender, repeater, or other similar equipment.

#### 3. Service Quality Standards

#### The Company:

- Provides voice grade access to the public switched network.
- Provides flat rated local exchange service with no addition charge to end users.
- Provides access to the emergency services provided by local government or other public safety organization, such as 911 and enhanced 911.
- Provides toll blocking and toll limitation services.
- Advertises the availability of its services and the charges using media of general distribution and on its website.
- Maintains a business office providing customers with access to a customer service representative either in person or via a local telephone call or toll-free telephone number during normal business hours.
- Directs after hour calls to the Company's help desk.
- Directs trouble reports to the on-call technician.
- Tracks all service orders to ensure they are completed in a timely manner.
- Measures its service connection and service interruption performance on a regular basis.
- Trains employees to:
  - Answer all incoming calls promptly.
  - Respond to all inquiries for information promptly and courteously.
  - Investigate thoroughly all customer complaints.
  - Be knowledgeable about products and service offerings so they can assist the customer with selecting the best service option.
- Has a process for periodic inspection, testing and preventive maintenance of its equipment to permit the rendering of safe, adequate and continuous service at all times.

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SAC: 381631 State: ND Red River Tel

Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

North Dakota and South Dakota: (Cont'd)

#### 4. Consumer Protection Rules

The Company has established operating procedures designed to facilitate compliance with applicable consumer protection rules which include compliance with the Customer Proprietary Network Information (CPNI) rules. The operating procedures include:

- Appointment of a compliance officer.
- A manual detailing the specific procedures for protecting consumer information.
- Employee training on an annual basis.
- A disciplinary process for improper use of consumer information.

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Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

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#### Minnesota:

As required by MN. Rule "7812.0700 Minnesota General Service Quality Requirements. Subpart 1" the local services provided by Red River Tel are provided under internal company operating procedures and publically available tariffs which are in compliance with applicable Minnesota Public Utility Commission orders and rules including:

7810.0100 DEFINITIONS. 7810.0200 SCOPE. 7810.0300 STATUTORY AUTHORITY.

#### **RECORDS AND REPORTS**

7810.0400 RETENTION OF RECORDS.
7810.0500 DATA TO BE FILED WITH THE COMMISSION.
7810.0600 REPORT TO COMMISSION ON SERVICE DISRUPTION.
7810.0900 LOCATION OF RECORDS.

#### **CUSTOMER RELATIONS**

7810.1000 INFORMATION AVAILABLE TO CUSTOMER AND PUBLIC. 7810.1100 COMPLAINT PROCEDURES. 7810.1200 RECORD OF COMPLAINT.

#### **CUSTOMER BILLING; DEPOSIT AND GUARANTEE REQUIREMENTS**

7810.1400 CUSTOMER BILLING.

7810.1500 DEPOSIT AND GUARANTEE REQUIREMENTS.

7810.1600 DEPOSIT.

7810.1700 GUARANTEE OF PAYMENT.

#### **DISCONNECTION OF SERVICE; SERVICE DELAY**

7810.1800 PERMISSIBLE SERVICE DISCONNECTIONS WITH NOTICE.

7810.1900 PERMISSIBLE SERVICE DISCONNECTIONS WITHOUT NOTICE.

7810.2000 NONPERMISSIBLE REASONS TO DISCONNECT SERVICE.

7810.2100 MANNER OF DISCONNECTION.

7810.2200 RECONNECTION OF SERVICE.

7810.2300 NOTICE REQUIREMENTS.

7810.2400 BILL DISPUTES.

7810.2500 ESCROW PAYMENTS.

7810.2600 WAIVING RIGHT TO DISCONNECT; EMERGENCY STATUS.

7810.2800 DELAY IN INITIAL SERVICE OR UPGRADE.

#### **DIRECTORIES**

7810.2900 CONTENT OF DIRECTORIES.

7810.3000 DIRECTORY ASSISTANCE.

7810.3100 CHANGES OR ERROR OF LISTED NUMBER.

#### **ENGINEERING**

7810.3200 CONSTRUCTION OF TELEPHONE PLANT. 7810.3300 MAINTENANCE OF PLANT AND EQUIPMENT. 7810.3900 EMERGENCY OPERATIONS.

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Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

Minnesota: (cont'd)

#### **INSPECTIONS, TESTS, SERVICE REQUIREMENTS**

7810.4100 ACCESS TO TEST FACILITIES.
7810.4300 ACCURACY REQUIREMENTS.
7810.4900 ADEQUACY OF SERVICE.
7810.5000 UTILITY OBLIGATIONS.
7810.5100 TELEPHONE OPERATORS.
7810.5200 ANSWERING TIME.
7810.5300 DIAL SERVICE REQUIREMENTS.
7810.5400 INTEROFFICE TRUNKS.
7810.5500 TRANSMISSION REQUIREMENTS.
7810.5800 INTERRUPTIONS OF SERVICE.
7810.5900 CUSTOMER TROUBLE REPORTS.
7810.6000 PROTECTIVE MEASURES.

7810.6100 SAFETY PROGRAM.

Red River Tel is in compliance with Federal CPNI rules, Red Flag Rules and other Federal and State requirements governing the protection of Customer's privacy.

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SAC: 381631 State: ND Red River Tel

Form 481 Line No. 610 Description of Functionality in Emergency Situations

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#### Red River Tel has:

- Established reasonable provisions' to meet emergencies resulting from failures of lighting or power service, sudden and prolonged increases in traffic, or from fire, storm, or acts of God including provisions for emergency power that provide:
  - o A minimum of four hours of battery service in each central office.
  - o A permanently installed power unit in exchanges, or
  - Mobile power units that can be delivered on short notice and which can be readily.
     connected in offices without installed emergency power facilities.
- Informed employees as to the procedures to be followed, including reasonable rerouting of traffic around damaged facilities and the deployment of emergency power, in the event of emergency in order to prevent or mitigate interruption or impairment of telecommunications service.

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Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

#### **Lifeline Terms and Conditions**

1. Red River Tel (Company) offers lifeline program-supported service to qualified low-income residential consumers for one telephone line per eligible household. The lifeline program provides discounts to eligible low-income consumers to help them establish and maintain telephone service. Lifeline assistance lowers the cost of basic, monthly local telephone service. Eligible consumers can receive \$9.25 per month in discounts. In addition, the Federal Universal Service Charge is not assessed to consumers participating in Lifeline. Toll Blocking prevents the placement of all long distance calls for which a subscriber would be charged. Toll Blocking is available to eligible consumers at no cost. Also, by choosing the option, consumers are usually not charged a deposit.

#### **Lifeline Program Eligibility Information**

#### **Program Based Eligibility**

Consumers are eligible for Lifeline if they, one of their dependents or their household participate in one of the following qualifying assistance programs:

Low-Income Home Energy Assistance Program (LIHEAP) Federal Public Housing Assistance (Section 8) Supplemental Nutrition Assistance Program (SNAP) Medicaid National School Lunch Program's Free Lunch Program Supplemental Security Income (SSI) Temporary Assistance for Needy Families (TANF)

Lifeline applicant must present documentation demonstrating eligibility either through participation in one of the qualifying federal assistance programs or through income-based means.

Acceptable documentation of program-based eligibility includes: current or prior year's statement of benefits from a qualifying program; notice letter of participation in a qualifying program; program participation documents; or another official document evidencing the consumer's participation in a qualifying program.

#### **Income Based Eligibility**

In addition, consumers are eligible for Lifeline if their household income is at or below 135% of the federal poverty guidelines.

2013 Federal Poverty Guidelines – 135%

Household Size		48 Contiguous States and D.C.
1	\$	15,512
2	•	20,939
3		26,366
4		31,793
5		37,220
6		42,647
7		48,074
8		53,501
For Each Additional Person, Add		5,427
For Each Additional Person, Add		5,427

Acceptable documentation of income eligibility includes: prior year's state, federal or Tribal tax return; current income statement from an employer or paycheck stub; social security statement of benefits; Veterans Administration statement of benefits; retirement/pension statement of benefits; unemployment/workmen's compensation statement of benefits; federal or Tribal notice of letter participating in General Assistance; or a divorce decree or child support award or other official document containing income information.

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Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

#### <u>Lifeline Terms and Conditions (Continued)</u>

#### <u>Lifeline Program Eligibility Information (Continued)</u>

### **Recertification of Lifeline Eligibility**

Lifeline recipients are required to recertify their eligibility annually. Failure to properly recertify a recipient's continued eligibility for the Lifeline program will result in termination of the Lifeline recipient's monthly Lifeline discount and de-enrollment from the Lifeline Program.

#### **Additional Lifeline Program Information**

The Lifeline program is limited to one benefit per household, consisting of either wireline or wireless service. A household is defined, for purposes of the Lifeline Program, as an individual or group of individuals who live together at the same address and share income and expenses. Lifeline is government benefit program, and consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be barred from the program.

- 2. The Local services for (Company) that serve as its Lifeline Plans are in Compliance with the Essential telecommunications service as specified in North Dakota Chapter 49-21 4.c as follows:
  - C. Primary flat rate residence basic telephone service including the following service elements:
    - 1) Billing and collecting of the telecommunications company's charges for the service
    - 2) Primary directory listing
    - 3) Access to assistance
    - 4) Access to emergency 911 service and emergency operator assistance in the local exchange areas in which emergency 911 service is not available
    - 5) Except as provided in section 49-02-01.1, mandatory, flat-rate extended area service to designated nearby local exchange areas.
    - 6) Transmission service necessary for the connection between the end user's premises and the local exchange central office switch including a trunk connection that has inward dialing and necessary signaling service such as touchtone used by end users for service.
- 3. The Company's flat rate plans include unlimited local exchange calling including usage to designated nearby local exchange areas. The flat rate plans do not include any toll usage. The rates for any toll usage are determined by the rate plans of the Toll Provider(s) that are selected by lifeline end users.
- 4. The Company has met and will meet the requirements of eligible telecommunications carrier advertising. This includes:
  - a. A full description of available services in the Company's Official telephone directory, including the process to be used by customers to quality for lifeline.
  - b. Advertising of the available universal service in media of general circulation in the Company's designated service area. Availability may be advertised in newspapers, company newsletters, company or civic internet sites, bill stuffer, direct mailings, or other means intended to convey availability throughout the designated service area.
- The specific Company terms and conditions for the Company's Lifeline Plans are set forth in pages included in Exhibit 1, attached.

Page 3 of 3

SAC: 381631 State: ND Red River Tel

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

#### **Minnesota:**

#### Rates:

The Company's Local service rates that serve as its Lifeline Plans are filed in Compliance with the regulatory requirements of Minn. Rules Ch. 7810 and Minn. Rules pt. 7812.0600.

#### **Lifeline Terms and Conditions:**

The Company will adhere to Lifeline Terms and Conditions above as well as Minnesota Administrative Rule "7817.0400 - Eligibility for Telephone Assistance Credits" which states:

#### Minnesota Administrative Rule 237 Chapter 7817.0400

**Subpart 1. Information provided.** Each local service provider shall annually mail a notice of the availability of the telephone assistance plan to each residential subscriber in a regular billing. If a subscriber has chosen to receive the regular billing other than through U.S. mail, the local service provider shall send the notice in a regular billing using the delivery method chosen by the subscriber for delivery of the regular billing. The notice must state the following: YOU MAY BE ELIGIBLE FOR ASSISTANCE IN PAYING YOUR TELEPHONE BILL IF YOU RECEIVE BENEFITS FROM CERTAIN LOW-INCOME ASSISTANCE PROGRAMS OR MEET CERTAIN INCOME LIMITS. FOR MORE INFORMATION OR AN APPLICATION FORM PLEASE CONTACT

<u>(local service provider)</u>. On request, the local service provider shall mail to a person an application form developed by the commission and the Department of Commerce, and a brochure that describes the telephone assistance plan's eligibility requirements and application process.

**Subpart 2. Application process.** On completing and signing the application certifying under penalty of perjury that the information provided by the applicant is true and that the statutory criteria for eligibility are satisfied, the applicant must return it to the local service provider for enrollment in the telephone assistance plan. An application may be made by the subscriber, the subscriber's spouse, or a person authorized by the subscriber to act on the subscriber's behalf.

**Subpart 4. Eligibility criteria.** To be eligible for a telephone assistance credit the applicant must:

- A. be a subscriber who resides in Minnesota or has moved to Minnesota and intends to remain; and
- B. be eligible for the federal Lifeline telephone service discount.

**Subpart 7. Applicant and recipient responsibilities.** Each applicant and each recipient shall provide current information to the local service provider about permanent changes that affect the applicant's or recipient's eligibility.

#### Subpart 8. Local service provider responsibilities.

- A. A local service provider shall begin providing telephone assistance credits to an applicant in the earliest possible billing cycle but not later than the second billing cycle following submission of a completed application demonstrating eligibility. If certified, the local service provider shall notify the applicant by, for example, placing telephone assistance credits on the bill.
- B. If an applicant is denied eligibility, the local service provider shall notify the applicant in writing of the reasons for the denial, of the right to appeal, and of the right to reapply.

Exhibit 1

SAC: 381631 State: ND Red River Tel

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

RED RIVER RURAL TELEPHONE ASSOCIATION ABERCROMBIE, NORTH DAKOTA

Section 4
Page 1
Revision 1

# LOCAL EXCHANGE SERVICE (NORTH DAKOTA)

The rates for Local Exchange Service are subject to the conditions set forth herein and the General Regulations governing provision of service. The General Regulations are set forth in Section 2 of this tariff book.

#### Local Exchange Service

- A. The Local Exchange Service Rates in this section are for service only and do not include any terminal equipment beyond the point of demarcation.
- B. The rates applicable to Local Exchange Service are composed of a Line Access Rate component plus (where applicable) an Extended Area Service component.

#### C. Service Upgrades

- 1) At the option of the Company, services will be upgraded to business individual line and residence individual line as facilities for the provision of such services permit.
- 2) Upgrading of business and residence services may be accomplished on a line by line basis at the option of the Company.
- 3) As an exchange is upgraded, as set forth in 1) above, the rates shown on the appropriate rate schedule will be applied.

#### D. Extended Area Service

- 1) Extended Area Service rate component.
  - a) EAS is a premium-type service offering made by the Company to certain exchanges, under specific conditions.
  - b) The Extended Area Service rate component, where applicable, is in addition to the Local Exchange Service Rate.

#### E. Taxes

1) Applicable taxes levied by state, county and local taxing authorities are in addition to the rates set forth in this tariff. (See also General Regulations, Section 2).

Effective: 12-16-05

RED RIVER RURAL TELEPHONE ASSOCIATION ABERCROMBIE, NORTH DAKOTA

Section 4 Page 2 Revision 3

# LOCAL EXCHANGE SERVICE (NORTH DAKOTA)

#### Class of Service

Exchanges - Abercrombie, Colfax, Great Bend, Mooreton

Class of Service

	Monthly <u>Rate</u>	
BUSINESS:		
One Party	\$ 18.95	(I)
Basic Coin Telephone Service	18.95	(I)
EAS Additive	N/A	
RESIDENCE:		
One Party	\$ 14.95	(I)
EAS Additive	N/A	

All rates are billed in advance. Payment for service is due when the statement is rendered.

Seasonal service was available prior to March 15, 2001, for customers requiring less than 12 months of service per year. The rate for this service is determined in accordance with section 5, page 36 of this tariff book.

	Hankinson, Lidgerwood Monthly Rate	Fairmount Monthly Rate	Wyndmere Monthly Rate
BUSINESS:			
One Party	\$ 33.20	\$ 26.02	\$ 26.02
Basic Coin Telephone Service	33.20	26.02	26.02
EAS Additive	N/A	5.23	7.62
RESIDENCE:			
One Party	\$ 14.13	\$ 18.00	\$ 18.00
Additional Line <sup>(1)</sup>	N/A	15.50	15.50
EAS Additive	N/A	2.61	3.80
COMBINATION BUSINESS/RESIDENTIAL:			
One Party	\$ 22.77	\$ 22.77	\$ 22.77
EAS Additive	N/A	4.25	6.19

<sup>(1)</sup> Residence additional line service was available in certain exchanges prior to December 16, 2005.

Effective: <u>3-1-07</u>

RED RIVER RURAL TELEPHONE ASSOCIATION ABERCROMBIE, NORTH DAKOTA

Section 4 Page 3 Revision 2

### LOCAL EXCHANGE SERVICE (NORTH DAKOTA)

### Extended Area Service (EAS)

Exchange EAS to Exchange

Abercrombie Colfax

Mooreton Wahpeton

Breckenridge, MN Campbell, MN Kent, MN

Colfax Abercrombie

> Mooreton Wahpeton Wyndmere

Breckenridge, MN Campbell, MN Kent, MN

**Great Bend** Fairmount

Hankinson Mooreton Wahpeton

Breckenridge, MN Campbell, MN

Mooreton Abercrombie

> Great Bend Wahpeton Wyndmere

Campbell, MN Kent, MN

Effective: 10-1-08

(C)

Colfax

Breckenridge, MN

RED RIVER RURAL TELEPHONE ASSOCIATION ABERCROMBIE, NORTH DAKOTA

Section 4 Page 4 Revision 1

# LOCAL EXCHANGE SERVICE (NORTH DAKOTA)

## Extended Area Service (EAS) (Continued)

<u>Exchange</u> <u>EAS to Exchange</u>

Fairmount Great Bend Hankinson

Wahpeton

Breckenridge, MN Campbell, MN

Hankinson Fairmount (C)

Great Bend Lidgerwood Wahpeton

Breckenridge, MN Campbell, MN

Lidgerwood Hankinson

Wahpeton Wyndmere

Breckenridge, MN Campbell, MN

Wyndmere Colfax

Lidgerwood Mooreton Wahpeton

Breckenridge, MN Campbell, MN

Effective: 10-1-08

RED RIVER RURAL TELEPHONE ASSOCIATION d/b/a RED RIVER COMMUNICATIONS ABERCROMBIE, NORTH DAKOTA

Section 4 Page 1

# LOCAL EXCHANGE SERVICE (MINNESOTA)

The rates for Local Exchange Service are subject to the conditions set forth herein and the General Regulations governing provision of service. The General Regulations are set forth in Section 2 of this tariff book.

#### Local Exchange Service

- A. The Local Exchange Service Rates in this section are for service only and do not include any terminal equipment beyond the point of demarcation.
- B. The rates applicable to Local Exchange Service are composed of a Line Access Rate component plus (where applicable) an Extended Area Service component.

#### C. Service Upgrades

- 1) At the option of the Company, services will be upgraded to business individual line and residence individual line as facilities for the provision of such services permit.
- 2) Upgrading of business and residence services may be accomplished on a line by line basis at the option of the Company.
- 3) As an exchange is upgraded, as set forth in 1) above, the rates shown on the appropriate rate schedule will be applied.

#### D. Extended Area Service

- 1) Establishment and discontinuance of EAS will be contingent upon Commission authorization.
- 2) Extended Area Service rate component.
  - a) EAS is a premium-type service offering made by the Company to certain exchanges, under specific conditions.
  - b) The Extended Area Service rate component, where applicable, is in addition to the Local Exchange Service Rate.

#### E. Taxes

1) Applicable taxes levied by state, county and local taxing authorities are in addition to the rates set forth in this tariff. (See also General Regulations, Section 2).

Effective: 4-1-13

RED RIVER RURAL TELEPHONE ASSOCIATION d/b/a RED RIVER COMMUNICATIONS ABERCROMBIE, NORTH DAKOTA

Section 4 Page 2

# LOCAL EXCHANGE SERVICE (MINNESOTA)

### Class of Service

Exchange

Class of Service	Kent,		
	Barnesville,		
	Rollag	Fairmount	
	Exchanges	Exchange	
BUSINESS:			
One Party	\$ 18.95	\$ 34.61	
Basic Coin Telephone Service	18.95	34.61	
EAS Additive	N/A	3.73	
RESIDENCE:			
One Party	\$ 14.95	\$ 13.96	
EAS Additive	N/A	1.53	

All rates are billed in advance. Payment for service is due when the statement is rendered.

Seasonal service was available prior to March 15, 2001, for customers requiring less than 12 months of service per year. The rate for this service is determined in accordance with Section 5, page 36 of this tariff book.

Effective: 4-1-13

RED RIVER RURAL TELEPHONE ASSOCIATION d/b/a RED RIVER COMMUNICATIONS ABERCROMBIE, NORTH DAKOTA

Section 4 Page 3

# LOCAL EXCHANGE SERVICE (MINNESOTA)

## Extended Area Service (EAS)

<u>Exchange</u> <u>EAS to Exchange</u>

Barnesville (rural) Barnesville (city)

Rollag

Rollag Barnesville (rural)

Barnesville (city)

Hawley

Kent Abercrombie, ND

Breckenridge Wahpeton, ND Mooreton, ND Colfax, ND Campbell

Fairmount Breckenridge

Campbell

Great Bend, ND Hankinson, ND Wahpeton, ND

Effective: 4-1-13

SAC: 381631 State: ND

Red River Rural Telephone Assoc

Form 481 Line No. 3017 RUS Annual Report

## **ATTACHMENT REDACTED IN ENTIRETY**